UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

hours per response. 16.00

SEC USE ONLY Prefix DATE RECEIVED

FINANCIAL

Telephone Number (Including Area Code)

801.532.1125

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MOV 14 200

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

FORM D

UNIFORM LIMITED OFFERING EXEMPTION Name of Offering check if this is an amendment and name has changed, and indicate change.) Series B Preferred Stock Financing Filing Under (Check box(es) that apply): Rule 504 Rule 505 | Rule 506 ULOE Section 4(6) New Filing Type of Filing: A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer check if this is an amendment and name has changed, and indicate change.) Attensity Corporation

90 South 400 West, Suite 600, Salt Lake City, UT 84101					1.532.1125			
Address of Principal Business Operat different from Executive Offices)	ions (if	(Number and Street,	(Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)					
Brief Description of Business Softw	vare Developm	nent	-1					
Type of Business Organization		Manual Annual Company			PROCESSED			
corporation	limited	l partnership, already formed	other (please	specify):				
business trust	limited	l partnership, to be formed			17 2003			
	,	Month Year			MON TY SANS			
Actual or Estimated Date of Incorpor	/ GLOBASON							

(Number and Street, City, State, Zip Code)

GENERAL INSTRUCTIONS

Address of Executive Offices

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada, FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File - U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been, made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. ---- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; Each general and managing partner of partnership issuers. Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Todd Wakefield Business or Residence Address (Number and Street, City, State, Zip Code) c/o Attensity Corporation 90 South 400 West, Suite 600, Salt Lake City, UT 84101 Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) David Bean Business or Residence Address (Number and Street, City, State, Zip Code) c/o Attensity Corporation 90 South 400 West, Suite 600, Salt Lake City, UT 84101 Director Executive Officer Check Box(es) that Apply: Beneficial Owner Promoter General and/or Managing Partner Full Name (Last name first, if individual) Craig Norris Business or Residence Address (Number and Street, City, State, Zip Code) c/o Attensity Corporation 90 South 400 West, Suite 600, Salt Lake City, UT 84101 Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Thomas L. Rich Business or Residence Address (Number and Street, City, State, Zip Code) c/o Attensity Corporation 90 South 400 West, Suite 600, Salt Lake City, UT 84101 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Charles House Business or Residence Address (Number and Street, City, State, Zip Code) 2464 Iron Canyon Drive, Park City, UT 84060 Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Ian Locke Business or Residence Address (Number and Street, City, State, Zip Code) 260 Queen Street West, 4th Floor, Toronto, Ontario, M5V 1Z8 Director Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** General and/or Managing Partner Full Name (Last name first, if individual) William Shiebler

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code) 280 Park Avenue, 6th Floor East, New York, NY 10017

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; Each general and managing partner of partnership issuers. Promoter Beneficial Owner Executive Officer Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Amanda Reed Business or Residence Address (Number and Street, City, State, Zip Code) 100 Hamilton Ave, Suite 150, Palo Alto, CA 94301 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) C. Woodrow Rea, Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 800 El Camino Real, Suite 180, Mountain View, CA 94040 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Palomar Ventures II, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 100 Hamilton Ave, Suite 150, Palo Alto, CA 94301 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Jefferson Partners Fund IV, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 260 Queen Street West, 4th Floor, Toronto, Ontario, M5V 1Z8 Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) The Entrepreneurs' Fund II, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 800 El Camino Real, Suite 180 Mountain View, CA 94040 **Executive Officer** Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) H. Robert Downs Business or Residence Address (Number and Street, City, State, Zip Code) 90 South 400 West, Suite 600, Salt Lake City, UT 84101 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

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			3.4	B. 1N	FORMAT	ION ABO	UT OFFER	ING .				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Yes	No ⊠			
2. What is the minimum investment that will be accepted from any individual?								\$ N/A				
											Yes	No
	e offering pe										\boxtimes	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)									offering. h a state			
Business or l	Residence Ad	dress (Numbe	er and Street,	City, State, 2	Zip Code)	, -						
Name of A	ssociated Br	oker or Dea	ler									***
	hich Person eck "All Sta										🗆 A	Il States
AL	AK	AZ	AR	CA	со	CT	DE	DC	FL	GA	HI	ID
IL	ĪN	ΙΑ	KS	KY	LA	МЕ	MD	MA	MI	MN	MS	мо
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ок	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Full Name (I	Last name firs	st, if individua	ıl)									
Business or l	Residence Ad	dress (Numbe	er and Street,	City, State, 2	Zip Code)		,				·	·
Name of A	ssociated Br	oker or Dea	ler		· · · · · · · · · · · · · · · · · · ·							
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AL	AK	AZ	AR	CA	co	СТ	DE	DC	FL	GA	н	ID
IL	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	мо
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Full Name (I	Last name firs	t, if individue	ul)								-	
Business or Residence: Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
AL	AK	AZ	AR	CA	СО	СТ	DE	DC	FL	GA	н	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check		
this box and and indicate in the columns below the amounts of the securities offered for exchange and		
already exchanged.	Aggregate	Amount Already
Type of Security	Offering Price	Sold
Debt	\$	\$
Equity	\$ 13,066,533.72	\$ 12,298,429.16
Common Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests		\$.
Other (Specify)	\$	\$
Total	\$ 13,066,533.72	
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or " zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	25	\$ 12,298,429.16
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	Type of Security	Dollar Amount Sold
Type of offering		
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$
Printing and Engraving Costs		\$
Legal Fees	🖂	\$120,000.00
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		\$
Total	🛛	\$120,000.00

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	b. Enter the difference between the aggregate offerin and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This of	lifference is the "adj	usted gro	SS	\$	12,178,429.16
	Indicate below the amount of the adjusted gross procused for each of the purposes shown. If the amount for check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part C - C	r any purpose is not the payments listed	known, furnish an e	stimate ar	ıd		
	Salaries and fees			□ \$_ □ •	Payments to Officers, Directors, & Affiliates	•	yments To Others
						_; ∷	
	Purchase, rental or leasing and installation of mac Construction or leasing of plant buildings and fac			՝ - ՝ s		°-	
	Acquisition of other businesses (including the val offering that may be used in exchange for the assessuer pursuant to a merger)	ue of securities invo	lved in this other	\$_ \$_		s	
	Repayment of indebtedness			□ \$_		_ s_	
	Working capital			□ \$_		⊠ s_	12,178,429.16
	Other (specify):			□ \$_		□ s _	
T	Column Totals		ATIBLE	S_S_	S s_		8,429.16
si	gnature constitutes an undertaking by the issuer to fur formation furnished by the issuer to any non-accredited	nish to the U.S. Sec	curities and Exchang	e Comm	ission, upon wr		
	suer (Print or Type)	Signature	1/////	9	Dat	-	
_	ttensity Corporation ame of Signer (Print or Type)	Title of Signer (Pr	Salar		No	vember 12	2, 2003
	odd Wakefield	President	int of type)				
		ATTENTIO					
lr	tentional misstatements or omissions of	fact constitute f	ederal criminal	violatio	ns. (See 18	U.S.C. 1	001.)

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